

To improve the registration: please complete this registration form in advance (1 ex. per participant)
 1) FILL IN this form 2) PRINT it out 3) SIGN the form 4) bring it with you to the START

REGISTRATION FORM for BRM - RM in BELGIUM			
date	distance km km	City of departure	N°
NAME + FIRST NAME			
STREET + NUMBER + BOX			N° Box
COUNTRY	POSTAL CODE	CITY	
DATE of BIRTH	TELEPHONE NUMBER	CELL PHONE NUMBER	
in case of accident, call:	TELEPHONE NUMBER	CELL PHONE NUMBER	
E-MAIL ADDRESS			
CLUB (name)		code ACP	
STATEMENT: I've read and agreed to the terms and conditions of BRM (Brevets Randonneurs Mondiaux). I declare being covered by an insurance against civil liability for my cyclists activities.			
date	signature for approval		

for regulations, please look at:

www.randonneurs.be
www.audax-club-parisien.com



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